STATE OF WISCONSIN
DEPARTMENT OF WORKFORCE DEVELOPMENT
Division of Workforce Solutions

Emergency Assistance Tracking System (EATS)
Web Request

(Please read the information on the next page for instructions.)

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1. **Please check one of the following:**

☐ Activate User ID for access to the EATS Web

☐ Delete User ID for access to the EATS Web

☐ Change (Profile, User Name, Social Security Number (SSN))

Effective Date:

Please fill in the following information (all items <u>must</u> be completed).

2. User ID (from DWD Account Creation screen)	3. User Name (Last, First, MI)	
4. *Social Security Number	5. Mother's Maiden Name	
6. W-2 Contract Agency Name (Do not abbreviate)	7. Agency Supervisor Name	8. Supervisor Telephone No. ( )
9. Regions or Counties Associated with Contract Agency		10. User Daytime Telephone No. ( )

11. Profiles
☐ Worker   ☐ Help Admin. (Central Staff Only)   ☐ Supervisor   ☐ State

Use of this logon and password provides access to confidential information, which must be safeguarded in accordance with Wisconsin Statutes. The User's signature on this form constitutes acceptance of responsibility for compliance with §49.32(10), §49.32(10m), §49.81, §49.83 and §943.70(2) and with DWD policy (attached to new logon approvals).

12. **Signature** - User	Date Signed
13. **Signature** - Supervisor	Date Signed

Return this form to your State/County/Tribal/W-2 Agency Security Officer

14. **Signature** – State / County / Tribal / W-2 Agency Security Officer	Date Signed
15. **Signature** - State Security Officer	Date Signed

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Instructions

1. Check the appropriate box to activate, delete, or change a user ID. Only one box should be checked. For effective date, enter the date the user's ID is to be activated, deleted, or changed.

2. Fill in the same user ID entered on the DWD account creation screen in which the user registered for network level access to the Emergency Assistance Tracking System (EATS) Web. This form is to request a system/application level user ID for the EATS Web.

3. Enter the user's name.

4. *Enter the user's Social Security Number (SSN). The SSN is one of the unique identifiers used for security purposes. The SSN is voluntary. If SSN is not provided, however, access will be denied, SSN will be kept confidential and not used for any other purposes.

5. Enter the user's mother's maiden name.

6. Enter the user's agency name.

7. Enter the user's supervisor's name.

8. Enter the user's supervisor's phone number.

9. Check the regions or counties associated with the W-2 agency for which the user should have access.

10. Enter the user's daytime phone number.

11. Enter the user's profile.

12. The user should enter their signature in this field.

13. The user's supervisor should enter their signature in this field.

14. The user's state, county, tribal or W-2 agency security officer should enter their signature in this field.

15. The state security officer should enter their signature in this field.

This form must be returned to the user's state, county, tribal or W-2 agency security officer for approval. The user's state, county, tribal or W-2 agency security officer will forward this form to the state security officer. The user will receive a notice when access has been approved.